

Patients' Experience of Undergoing Vascular Interventional Radiology And Radiographers' Experience of Caring for these Patients

Akademisk avhandling

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This doctoral thesis is based on the following papers

- I** Lundén M.H., Bengtson A. & Lundgren S.M. (2006). Hours During and After Coronary Intervention and Angiography.
Clinical Nursing Research 15:274.
- II** Lundén M., Lundgren S.M. & Lepp M. (2012). The Nurse Radiographers' Experience of Meeting with Patients During Interventional Radiology.
Journal of Radiology Nursing 31:53-61.
- III** Lundén M., Lundgren S.M., Persson L-O. & Lepp M. Patients' feelings and experiences before undergoing a Percutaneous Transluminal Angioplasty.
Submitted.
- IV** Lundén M., Lundgren S.M., Persson L-O. & Lepp M. Patients' feelings and experiences during and after Percutaneous Transluminal Angioplasty.
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PATIENTS' EXPERIENCE OF UNDERGOING VASCULAR INTERVENTIONAL RADIOLOGY AND RADIOGRAPHERS' EXPERIENCE OF CARING FOR THESE PATIENTS

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Abstract

Heart and vascular disease is a health problem through out the world and the technical development in the Interventional Radiology (IR) field is rapid. The possibilities to treat vascular disease has expanded vastly and instead of having traditional open surgery the treatment can be performed by catheterization guided with radiology. The interventions (PCI and PTA) are performed to open or widen narrow cardiac or peripheral arteries by using catheters guided with radiology. The technique is constantly evolving and an increasing number of persons will undergo PCI or PTA. However we still know very little about the patients' emotional feelings and experiences of undergoing these treatments.

The overall aim of this thesis was to explore and investigate patients' experience of undergoing Percutaneous Coronary Intervention (PCI) and Percutaneous Transluminal Angioplasty (PTA), and radiographers' experience of caring for patients during Vascular Interventional Radiology (VIR).

Method: This thesis consists of four studies and uses both qualitative and quantitative methods. The data collection comprised interviews (studies I-IV) and quantitative measurements (studies III, IV). The participants were patients (studies I, III and IV) and radiographers (study II). Content analysis was used in studies I, III and IV, and a hermeneutic approach in study II. The quantitative measurements were analysed by statistical analysis (SPSS).

Result: Four main categories were identified in study I that describe patients' experience during and after PCI: emotional thoughts, bodily sensations, nursing intervention of importance, and personal strategies. Study II focused on radiographers' experience of caring for patients during PTA. The radiographers needed to be able to sense and respond to patients' diverse needs to create a dialogue with the patient and a trusting atmosphere. The radiographers' experiences show the complexity of caring for these patients and the radiographer needs caring skills and compassion in combination with medical and technical competence. Studies III and IV aimed to identify patients who were predominantly calm or anxious in connection with the PTA treatment and to disclose the reasons for these particular feelings. Sixty-nine per cent of the patients were calm before the PTA and 78% stated themselves to be calm after the PTA. Lack of knowledge about the disease or treatment options and fear for an unsuccessful outcome of the PTA could cause anxiety. Study IV showed that the encounter and dialogue with the radiographer and physician during the PTA could convey feelings of calmness during the PTA.

Conclusion: How the patients were cared for by the staff was considered important both in the acute situation and after the treatment and small caring gestures had a large impact on the patients' wellbeing. The time during and after the procedure can be made acceptable, even in those cases when there are complications and prolonged bed rest. A majority of the patients undergoing PTA are calm both before and after the PTA treatment. How well the patients' experienced the caring chain had worked influenced trust and levels of anxiety. Technology was seen as giving hope for improvement, cure or increased quality of life. The nurse radiographers need time to establish a relationship with the patient and increased possibility to relieve pain. Knowledge and information increase the patients' sense of perceived control and prevents distrust or feelings of being let down. Unpredictability increases the feeling of losing control and upcoming events needs to be more predictable, therefore the logistics regarding referrals and timetables should be looked over. There is a need to strengthen the patients' participation in the decision making regarding their treatment. In order to do so the patients need comprehensive information, knowledge and guidelines.

Keywords: patient perspective, radiographers' perspective, radiography, PTA, PCI, calm, anxiety, hermeneutic, content analysis

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